

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | UT       | 102607 | 8/16/00  |
| O.P.E. CLASSIFIER         |          | 780    | 8/22/00  |
| FORMALITY REVIEW          | MM       | 925    | 9/28/00  |
| RESPONSE FORMALITY REVIEW | request  |        | 03-28-01 |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Best Available Copy

| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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